

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number		Filing Date				
							10568241						
							Applicant(s) Donald Highgate						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1		1				51						
2		1		1			52						
3		1		1			53						
4		2		1			54						
5		(1)		1			55						
6		(1)		1			56						
7		(1)		1			57						
8		(1)		1			58						
9		(1)		1			59						
10		(1)		1			60						
11		(1)		1			61						
12		(1)		1			62						
13		(1)		1			63						
14		(1)	1				64						
15		1		1			65						
16		1		1			66						
17		(1)		1			67						
18				1			68						
19				1			69						
20				1			70						
21							71						
22							72						
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39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	1		2		0								
Total Depend	17		18		0								
Total Claims	18		20		0								